

# MassHealth REVS User Guide

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## About This User Guide

The Recipient Eligibility Verification System (**REVS**), and its subsystems: the Claim Status Inquiry System, and Security Maintenance System are applications available to providers participating in **MassHealth**. These systems comply with the federal Health Insurance Portability and Accountability Act (HIPAA) regulations and accurately provide the most current MassHealth member information, 24 hours a day, seven days a week, except Sunday from 3:00 A.M. - 6:00 A.M. EST.

This guide provides instructions for using REVS and its subsystems, with information about a range of access methods for these applications, including:

- WebREVS
- REVS PC Software
- Point-of-Service (POS) Device
- Remote Access Server (RAS)
- Automated Voice Response (AVR)
- Eligibility Operator

### ***Important Contact Information for REVS:***

*For further information about REVS access methods or other questions:*

*Contact the REVS Help Desk at (800) 462-7738*

*OR*

*E-mail us at [REVSHelpDesk@eds.com](mailto:REVSHelpDesk@eds.com).*

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## Introduction

MassHealth maintains a Web site that has useful information for MassHealth providers. The Web site, <http://www.mass.gov/masshealth>, includes updates to the provider manual, recent provider bulletins, links to useful documents, regulations, and other information. There is also a section that contains information about REVS that is similar to what you'll find in this guide.

**NOTE:**

*For further information, please visit:*

*<http://www.mass.gov/masshealth> From the main page, click on Providers; From the provider page, click on REVS.*

*OR*

*[http://www.state.ma.us/dma/providers/revs/revs\\_IDX.htm](http://www.state.ma.us/dma/providers/revs/revs_IDX.htm)  
Click on the Documents link to download REVS related documents.*

## Important Reasons To Access REVS Prior To Providing Services

- Verifies the MassHealth member is eligible for services; provides coverage type and additional benefit information
- Identifies the current Primary Care Clinician for each individual MassHealth member enrolled as a member of the Primary Care Clinician (PCC) Plan, if applicable
- Identifies the current provider for each MassHealth member enrolled as a member of the Managed Care Option (MCO) plan, Massachusetts Behavioral Health Partnership (MBHP), Senior Care Option (SCO), or Program for All Inclusive Care for the Elderly (PACE) program.
- Reduces the risk of your claim being denied
- Simplifies the identification of a member's Local Office/MassHealth Enrollment Center for purposes of resolving any questions on eligibility timeframes
- Identifies Third Party Liability information, if any, to ensure proper billing
- Aids in providing timely health care services for all members

## Using REVS

### **Trading Partner Agreements**

To access REVS, the provider must first have submitted a signed Trading Partner Agreement (**TPA**). The primary contact for Health Insurance Portability and Accountability Act (**HIPAA**) at your organization should be able to give you more information on whether you have a signed TPA on file. The TPA and other related information are available on the MassHealth Web site at <http://www.mass.gov/masshealth>.

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### ***User ID and Password***

To access REVS and its Claim Status and Security Maintenance subsystems, you must also have a valid **User ID** and **password**. To determine if you have a valid User ID and password, call the REVS Help Desk at (800) 462-7738, after submitting the signed TPA referred to in the preceding section. Each provider receives one User ID and password per MassHealth provider number. The provider will then be able to create User IDs and passwords for their staff, as explained in the User ID Types section.

### ***HIPAA Compliance***

REVS meets the ANSI ASC X12N 270/271 Health Care Eligibility Benefit Inquiry and Response standards. The Claim Status subsystem meets the ANSI ASC X12N 276/277 Health Care Claim Status Request and Response standards. Data transmissions to and from these systems meet the security standards of the HIPAA Security Regulations.

The MassHealth Companion Guides for HIPAA transaction sets 270/271 and 276/277 can be found at the following Web site:  
<https://www.massrevs.eds.com>.

### ***Security and Privacy***

Your current MassHealth provider agreement in combination with the TPA requires you to make every effort to secure and protect information transmitted to and received from our system. The HIPAA Privacy Rule establishes the base line for MassHealth's privacy policy. More stringent local laws take precedence over the HIPAA base line.

## MassHealth Card

REVS produces and issues plastic ID cards to most members who receive health care benefit plans paid for by Masshealth. These cards have a black magnetic stripe on the back, where the member's card number is encoded (see page 7). Eligibility dates are not printed on a member's card; therefore, eligibility must be verified through REVS prior to providing services.

If eligibility is not verified for each member before services are provided, you will risk non-payment for those services if the member is ineligible, or if you do not obtain an authorization necessary for providing those services. Always ask for the member's recipient identification (**RID**) number. Once you have received the member's RID, make sure to note it in your records, and in subsequent visits, confirm that it has not changed. Requesting and verifying RID numbers will minimize billing errors and streamline your access to REVS information.

The MassHealth card shows the card number, names, and member's recipient identification (RID) numbers of the cardholder and other members listed on the card.

Occasionally, a member may present you with multiple MassHealth cards, causing confusion as to which card is current. If an old card is presented, the system may respond with an invalid card message. This does not necessarily mean the member is ineligible for services; rather they may have recently received a new card(s) in the mail. A member will receive a new card(s) when:

- There is a change in the first or last names of any member listed on the card.
- There is a change in the identification number of any member listed on the card.
- A member has been added or removed from a card.
- The member has reported the card lost or stolen.
- The member has indicated that the card is defective, and Local Office/MassHealth Enrollment Center (MEC) personnel have verified this.

**NOTE:**

*A maximum of four members can be listed on a MassHealth card - the cardholder and up to three members. Any additional members associated with the cardholder will be listed on another card issued to the same cardholder. The additional card will have a different card number and will list up to four members, including the cardholder. From the cardholder's perspective, both cards will allow the provider to verify eligibility information.*

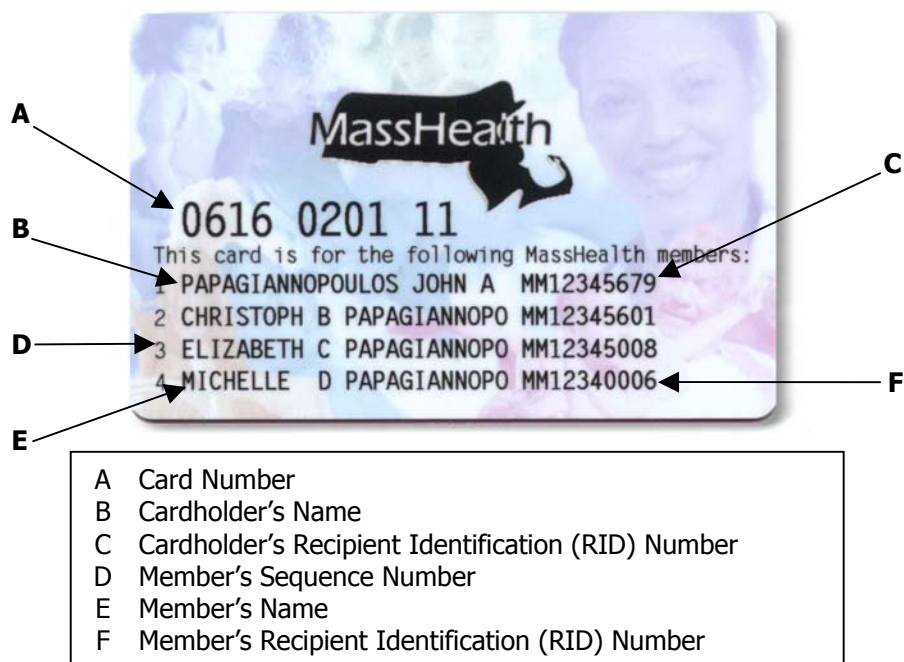
The following page contains illustrations and detailed descriptions of the MassHealth card. Be advised that some of the MassHealth cards that you may receive for verifying eligibility may have the MassHealth member listed twice. The member's recipient identification (RID) number that ends with a letter cannot be used for verifying eligibility. In these circumstances, the same member will be listed elsewhere on the card with a different member's recipient identification (RID) number. Use that identification number (or the sequence number associated with it) to verify eligibility.

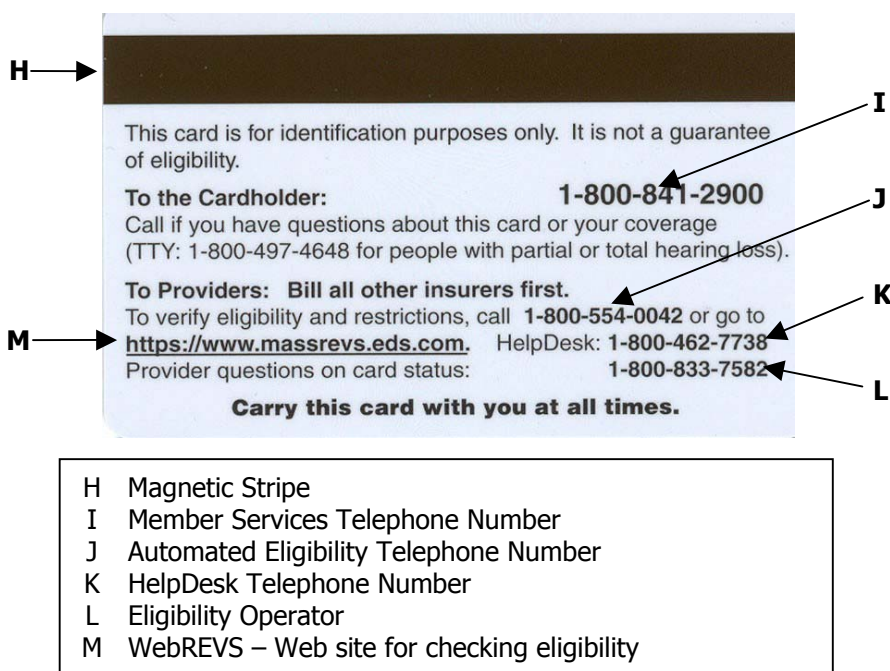
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### ***Illustration of the MassHealth Card***

The illustration below is the most recent version of the MassHealth card. Should you receive older versions of the card, do not assume that the cardholder is ineligible--the card may still be valid. Always verify a member's eligibility the day that services are provided to ensure that they are eligible on that date of service.

**Figure 1: MassHealth Card (Front)**



**Figure 2: MassHealth Card (Back)**

### ***Temporary MassHealth Cards***

Most persons authorized to receive health benefits will have a plastic MassHealth card. A temporary paper card, or a printout of the REVS Recipient Eligibility Inquiry screen may be issued to a member whose eligibility has just been determined, or whose plastic MassHealth card has been lost or stolen. Do not assume that a person who has a temporary paper card will eventually be issued a permanent MassHealth card. The time period for which the MassHealth member is eligible for benefits will be printed on the paper card or the screen printout. To determine what benefits the member is eligible for, ask the member for the paper that identifies their specific coverage type. For eligibility questions relating to the temporary MassHealth card, call the number listed on the temporary card, or screen printout.

Sometimes you cannot verify eligibility through REVS with temporary paper cards. However, to guarantee payment of any claims submitted, MassHealth recommends that you always photocopy the front and back of the temporary paper card or screen printout, while also checking for the valid eligibility dates listed on the card. An example of a temporary paper card is displayed below.



**Figure 3: Temporary MassHealth Card (Front)**

### Temporary MassHealth Card

MEC/TAO	CAT	For MassHealth eligibility questions, call 1-800-841-2900 (TTY: 1-800-497-4648 for the deaf and hard of hearing).
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Eligible from:

Eligible through:

Name/RIID of Eligible Person	Age	Sex	Res	TPL

See back of card for more information.

Messages:

Issued to:


✕

Please sign right away.

**Figure 4: Temporary MassHealth Card (Back)**

**Important!**

You can use this temporary card **only** for the time period listed on the other side of this card. The dates next to "Eligible from" and "Eligible through" show this time period.



TMC (Rev. 02/01)

The other side of this card lists the members of your family who are covered by MassHealth. This means that MassHealth pays for their health care. We may need to give you more than one card if we cannot list all your family members who are covered by MassHealth on one card. MassHealth is a state program run by the Division of Medical Assistance.

Show this card to your doctor or other medical provider whenever you or a listed family member get health-care services. If you need to talk to us about this card, be sure to give us the red "T" number from the other side of this card.

If you have any other health insurance, you must use that insurance first.

## REVS and its Subsystems

REVS and its subsystems are described in the sections that follow. The **Eligibility** inquiry and response enables you to verify MassHealth membership; the **Claim Status** inquiry and response subsystem enables you to request the status of specific claim(s); and the **Security Maintenance** subsystem helps you manage the activities of your subordinate users by enabling you to add, delete, link, and modify the users that you have authorized as your subordinate users.

### Eligibility Verification

If you have a member's plastic MassHealth card, or the member's recipient identification (RID) number, or if you know the member's name, date of birth, and gender, you can verify their eligibility using any of the following access methods:

- WebREVS
- REVS PC Software
- Point-of-Service (POS) Device
- Remote Access Server (RAS)
- Automated Voice Response (AVR) System
- Eligibility Operator

Each of these access methods is described on the pages that follow. If none of them seem appropriate for use in your current business process, please call the REVS Help Desk at (800) 462-7738 and we will explore what other options may be available.

**NOTE:**

*WebREVS or REVS PC software are recommended as your primary methods of performing inquiries. They are quick, efficient, and provide you with the option to print eligibility information.*

### Eligibility Inquiry Options

REVS allows you to request information about a member's eligibility, using various pieces of information. Your valid User ID is required for all eligibility inquiries, and you may also use one of the following three combinations with your User ID to find a member in our database:

#### Inquiry by Member's Recipient Identification (RID) Number

- Member's recipient identification (RID) number

#### Inquiry by Card Number

- Member's MassHealth card number
- Member's MassHealth sequence number

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**Inquiry by Member's Name**

- Member's last name
- Member's first name initial
- Member's date of birth
- Member's gender

**Eligibility Response Information**

All access methods except the Automated Voice Response (AVR) system will respond with the member's demographic and eligibility information, as follows:

- Member's recipient identification (RID) number
- Name
- Address
- MassHealth card & sequence number
- Social Security Number, if available
- Date of birth
- Gender
- Date of service
- Eligibility status
- MassHealth coverage type
- Local worker office
- Managed Care Organization (MCO) information, if applicable
  - MCO provider name
  - Phone number
- Primary Care Clinician (PCC) information, if applicable
  - PCC name
  - Phone number
  - Address
- Long-Term-Care (LTC) Provider information, if applicable
  - LTC provider number
  - Name
  - Phone number
  - Address
- Program for All Inclusive Care for the Elderly (PACE), if applicable
  - PACE provider name
  - Phone number
- Senior Care Option (SCO) information, if applicable
  - SCO provider name
  - Phone number
- Third Party Liability (TPL) information, if applicable
  - Coverage type
  - Policy number
  - Carrier code
  - Carrier name
  - Carrier address

## **Claim Status**

The Claim Status subsystem provides you with the current status of an adjudicated claim submitted to MassHealth for payment. You may access the Claim Status subsystem using one of the methods below.

- WebREVS
- REVS PC Software
- Remote Access Server (RAS)

### **Claim Status Request**

A claim status request can be made using some of the criteria listed below. These request fields are consistent throughout the access methods and include:

- Servicing provider number
- Member's recipient identification (RID) number
- Member's last name, first name, and middle initial, if applicable
- Date of birth
- Gender
- Date(s) of service

There are other values that you may include with your request to refine your inquiry to get information for specific claims. Entering this additional information, may efficiently limit the number of responses that you will receive. These additional filters include:

- Transaction Control Number (TCN)
- Patient Account Number (PAN)
- Service code of the service you indicated on the claim
- Billed amount

### **Claim Status Response**

You may receive varied results depending on the information you include in your request. In a real-time, single inquiry mode, you may inquire using a range of dates of service that span six months at a time. While performing inquiries in a real-time mode, you will receive results from the previous 18 months. For the status of a claim that was adjudicated more than 18 months prior, use a batch inquiry method. A batch inquiry method allows multiple inquiries to be sent in one submission and receive the responses back all at once. Please see the Access Methods section on page 17 for more information on batch submissions.

When you receive a response from the Claim Status subsystem you should see the following results:

- Verification of the billing provider number
- Member's recipient identification (RID) number
- Member's name, date of birth, and gender
- Effective date of the status provided
- Original charge amount
- Amount of the payment, if applicable
- Adjudication date of the claim
- Date the claim appears on your remittance advice, if applicable

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- Transaction Control Number (TCN) assigned to the claim
  - Patient Account Number submitted on the claim, if applicable
  - Date(s) of service for the claim
  - Service code(s) for the services provided
  - Number of units billed on the claim

The response "Entity not found" indicates that the combination of claims or members was not found in the system. Please verify your search criteria and if you believe that the criteria entered are correct, please call the REVS Help Desk at (800) 462-7738 for assistance. For options about additional Claim Status access methods, please call the REVS Help Desk and we can review what other options may be available.

## ***Security Maintenance***

Each MassHealth provider receives a **User ID** and **password** for use by its organization after the TPA has been processed. The Security Maintenance subsystem enables you to authorize users within your organization to perform inquiries under your provider number. These authorizations may be created, deleted, and modified through this system. Depending on the way your business is designed, this may be very helpful for you. If you have multiple provider numbers or if your organization has staff members who work for several providers, they may be linked to your provider number without having to create a new User ID and password for them.

To access the Security Maintenance subsystem for these features, use one of the following access methods:

- WebREVS
- REVS PC Software
- Point-of-Service (POS) Device
- Automated Voice Response (AVR) System

WebREVS and REVS PC Software offer **full** functionality to add, link, modify, and delete users. These two methods also allow you to give access to only certain functionality in REVS. Please see the WebREVS User Guide and REVS PC Software User Guide for more information.

The POS device and AVR system have **scaled-down** functionality within the Security Maintenance application. You may only add and delete users and maintain passwords on the POS device. The AVR system will only allow maintenance of passwords. Please refer to the AVR System User Guide or the POS device User Guide for more information about security maintenance options.

These documents are located on the Web at:

[http://www.state.ma.us/dma/providers/revs/revs\\_IDX.htm](http://www.state.ma.us/dma/providers/revs/revs_IDX.htm). Click on the Documents link to download REVS related documents.

## **User ID**

There are specific **requirements** for creating a new User ID. The User ID must be alphanumeric; letters and numbers only. It must be at least four characters in length, but no greater than seven characters maximum. Also, there must be at least four unique letters in the User ID.

To access REVS using WebREVS, REVS PC software, the POS device or the Eligibility Operator, use the alphanumeric User ID. To access REVS using the AVR system, use the number key on which the letter appears; for Q and Z, press the 1 key. A conversion chart for the AVR system appears on page 30 of this document for reference.

For example, if the User ID is *ABCD123* you will access WebREVS, REVS PC software, the POS device and the Eligibility Operator using *ABCD123*. You will access the AVR system using *2223123* – the letters ABC are replaced with 2, the number on which these letters appear on the keypad and the letter D is replaced with 3, the number on which it appears on the keypad. This process only applies when verifying eligibility on the AVR system. In the event you need to verify eligibility by a member's name or change a password, a different process applies. It is important that you listen carefully to the instructions on the AVR system, especially when changing the password.

#### Examples of User IDs:

Valid User IDs	Invalid User IDs	Issues
TOBY	ACE	Too few characters
REGDESK	DADDY	Too few unique characters
ABCD123	1234567	Too few letters
DRNO	Dr. No	Periods and spaces not allowed

## Password

The instructions that follow must be adhered to not only by you, but must also be communicated to and adhered to by each user whom you authorized.

You must protect your password securely. Do not write your password in an easily accessible place. Do not share your password with anyone. Choose a password that is not easy to guess.

Like the User ID, there are **requirements** for creating a new password. The password must be alphanumeric (letters and numbers only). It must be a minimum of six characters, with a maximum of eight characters. There must be four unique letters in the password. There must be at least one number in the password.

When you sign on to the system for the first time, you will be prompted to change your password. Once you initially change your password, you will be the only one who knows what it is. The password will expire after 90 days from its creation date. The system will begin to notify you one week prior to your password's expiration, and ask you if you would like to change it. After 90 days, you will be prompted to change your password.

New passwords cannot be the same as your User ID or your current password.

#### Examples of Passwords:

Valid Passwords	Invalid Passwords	Issues
WEBREVS2	WEBREVS	Must include a number
JOHN03	JOHN3	Must be 6-8 characters
DEBBIE9	DEB123	Must have at least 4 letters
1WEBBER	1WEB	Must be 6-8 characters

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## User ID Types

There are a few **different types** of User IDs that you need to be familiar with. Each User ID type has different characteristics that must be understood.

### Provider User ID

MassHealth supplies a Provider ID in the Trading Partner Agreement (TPA) acknowledgement letter. This ID is tied directly to a single provider number. If your facility has multiple "Pay-to" provider numbers, you should have submitted a TPA for each provider number. The Provider ID enables access to all of the REVS subsystems including Security Maintenance, where you can authorize subordinate users. A Provider ID may not be linked to any other provider numbers. It is only associated with the provider number that it was assigned to when the TPA was processed.

### Subordinate User ID

A Subordinate User is a user that was created by the Provider ID. Subordinate users may be granted access to one or all of the applications in REVS. When a Subordinate ID is created, that ID is linked to the provider number of the Provider ID that created it. Subordinate users may be authorized to perform transactions on behalf of multiple provider numbers. A Subordinate ID is given this access by being linked to another provider number by the Provider ID for that provider number or an Administrator ID for that provider.

### Administrator User ID

An Administrator ID is a higher level of a Subordinate ID. A subordinate user may be authorized for all applications within REVS. An Administrator user would be this type of subordinate. A user who has access to Security Maintenance for a provider number is considered to be an Administrator. This is especially useful when a provider has multiple numbers or there is a group practice. The individual Provider IDs for that group would be able to link a user that has access to create other users for multiple provider numbers.

## Adding a New User

You may **add subordinate users** so that they may use REVS and its subsystems on your behalf. Subordinates may be granted authorization to the individual applications, as you choose. You may choose to enable a subordinate to access the Eligibility Inquiry application only. A user of this type would be a typical subordinate. You may choose to enable a user to access the Eligibility Inquiry and Claim Status applications. This would be another example of a typical subordinate.

EDS recommends creating Subordinate User IDs for staff members who access REVS in your facility. For example, multiple POS devices sharing a single common User ID raises issues when the password for a Provider User ID is changed – whether that change is due to the required 90-day password expiration or for other reasons; and whether the new password is created on another of the POS devices or by any other access method (e.g., WebREVS). Issues may include inability to login, or the User ID locked out on a POS device.

The requirements for adding a new user may vary depending on the access method. In all cases, you will see a form where you will enter information about the new user.

<b>User's Name:</b>	This name will appear as a subordinate on your list
<b>Unique Identification Number:</b>	This is a nine digit number that will identify the user when the password is locked
<b>User ID:</b>	This is the ID the user will use to login
<b>User Password:</b>	This is the initial password you will create for the user
<b>Confirm Password:</b>	This will verify that the password was entered correctly

You will also need to select the applications for which you want the new user to be authorized.

### Link an Existing User

You have the option of linking users, who have previously been created by another Provider User ID, to enable them to perform functions using your provider number. Choose the Link an Existing User function, a form will open, and you may then enter the required information.

<b>Unique Identification Number:</b>	The Unique Identification Number assigned to the User ID
<b>User ID:</b>	The User ID that was previously created by another provider

You will have to select the applications for which you want the user to have access.

### Resetting a User's Password or Modifying a User

To reset a user's password, you must click on the user's name in your subordinate list. This will open a form where you will be able to update the user's password.

<b>User's Name:</b>	This name can be updated.
<b>Unique Identification Number:</b>	This number can be updated.
<b>User ID:</b>	This ID cannot be changed; the user must be deleted and then re-added.
<b>User Password:</b>	This is the reset password you will create for the user.
<b>Confirm Password:</b>	This will verify that the password was entered correctly.

You can also change which authorizations are enabled by selecting or unselecting the applications at the bottom.

### Deleting a User

There will be times when, for your own protection, you must delete a Subordinate User. This may occur with staff changes, or you may find you no longer need particular personnel to access REVS.

To delete a subordinate from your list, click the check box to the left of the user's name. This will bring up a form that prompts you to confirm that you want to delete the user and it displays the user's properties. To finish the deletion, click Confirm Delete.



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## Access Methods

There are several ways to access REVS. Each method has its own performance and/or convenience advantages. There are two ways to use these access methods: **Single Inquiry** (or Real-Time) and **Batch Inquiry**. Please explore these options to help determine which access methods are most suitable for the way you do business. For accessing REVS using any of the access methods described below, you will need a User ID and Password. Please contact the REVS Help Desk at (800) 462-7738 for additional information.

### *Types of Inquiry – Single Vs. Batch*

#### **Single Inquiry**

A single inquiry transaction occurs when you connect to REVS and deliver a single inquiry, at which point the system processes and responds to that transaction while you are still connected. These transactions are sent one at a time and are responded to in the same order as received if you are performing more than one inquiry. The system will respond to each inquiry within eight seconds.

Single Inquiry transactions are advantageous because of the speed in which they occur. If your organization sees MassHealth members on a non-specific schedule such as walk-ins, emergency care, or other “as needed” basis, this method would be more efficient for you to use than a batch type access method.

Some of the access methods can be used for single inquiry only. These include:

- WebREVS
- REVS PC Software
- Point-of-Service (POS) Device
- Automated Voice Response (AVR) System

#### **Batch Inquiry**

Batch Inquiry is submitting a set of inquiries to REVS in one submission file and receiving a response to all of them in one response file. Batch inquiry is most useful to providers that have a large volume of MassHealth patients and can easily supply REVS with information from their billing, registration, or other system at their facility.

Batch Inquiry transactions are advantageous because of the speed in which they can be sent for a large volume of visits. If your organization sees MassHealth members on a regular schedule and has the ability to provide REVS with an automated file of the next day’s visits by MassHealth patients (by your IT staff), this method would be more efficient for you to use than a single inquiry access method.

Three access methods can be used for batch inquiry:

- WebREVS
- REVS PC Software
- Remote Access Server (RAS)

The following sections describe each access method available by single inquiry and by batch inquiry.

## **WebREVS – Single Inquiry**

WebREVS is a web site that has been developed to perform Eligibility inquiries, Claim Status requests, and Security Maintenance functions using the Internet. This site allows a provider to perform single eligibility inquiries similar to the PC software and the POS device.

The ideal candidate for WebREVS would be a provider who services a small number of MassHealth patients daily. The benefits of WebREVS include:

- Eligibility verification of a small number of members with an internet connection.
- Significant reduction of administrative time needed to verify MassHealth eligibility.
- Aids in eliminating the potential denial of claims submitted for payment.
- Capability of printing all responses on a local printer at your office.
- Utilize existing technology that may exist at your office (i.e., PC and internet)

## **WebREVS – Batch Inquiry**

The WebREVS Web site also allows submission of batch inquiry files. The files submitted by this method should be only in the approved HIPAA X12N format. The maximum size allowed for an upload file is 4MB.

For a copy of the **Companion Guide** for Eligibility (270/271) and Claim Status (276/277), please visit <https://www.massrevs.eds.com>, click on Help, then click on Documents. The Companion Guides are also available on the MassHealth Web site at [www.mass.gov/masshealth](http://www.mass.gov/masshealth); click on Providers, REVS, then Documents.

Batch response files are available within one hour of uploading the inquiry file. Responses are returned in the HIPAA X12N format, and should be translated according to the above mentioned Companion Guides. Once an inquiry submission file is processed it will be available for download for two calendar days before being removed.

## **REVS PC Software – Single Inquiry**

REVS PC Software is a stand-alone Web-enabled software that has been developed to perform eligibility inquiries using a personal computer. This software allows a provider to perform single eligibility inquiries similar to a POS device or the AVR system. REVS PC software can be used to make an inquiry by phone call via modem or by using the network connection you have established with your Internet Service Provider (ISP). REVS PC software also makes it easy to store previous eligibility checks. It also offers reporting functionality that allows a provider to customize print and sort features. These reports can be exported in various formats including MS Excel, MS Word etc.

The **ideal candidate** for REVS PC Software would be a provider who services at least 25 or more members daily (who visit the provider on a regular predetermined schedule) and has a PC with a modem or an ISP network connection. The benefits of the software include:

- Significant reduction of administrative time needed to verify MassHealth eligibility.
- Aids in eliminating the potential denial of claims submitted for payment.
- Capability of storing MassHealth data in one place.

- 
- Capability of printing all responses on a local printer at your office.
  - Utilize existing technology that may exist at your office (i.e., PC and modem.)
  - Capability to sort large eligibility responses by last name, member's recipient identification (RID) number, MassHealth card number, eligible or ineligible response or your internal patient number, or date of service.

The software requires a minimum operating system of Windows 2000 SP2/XP with a Pentium processor, 40MB of free disk space, 32MB of RAM, CD ROM drive and/or high speed internet access for installation, and a modem with an available phone line or high speed internet access for accessing REVS information.

### ***REVS PC Software – Batch Inquiry***

The REVS PC software offers two options for batch capability. The first is a built-in functionality. You may add members to a database that is stored within the software so that you build a database of members that you frequently see. Using the database that you created within the software, you may send a batch of member inquiries based upon specific criteria. You may create batch keys that help you maintain these batches. For more information, please see the REVS PC Software User Guide.

The second batch option is a stand-alone function called **REVScall**. This feature enables you to send ASC X12N 270 and 276 transactions directly to our system without data entry. If you have a system that can create 270 and/or 276 transactions, you can use REVScall to validate the format as MassHealth compliant, and to send the transaction. The file returned is a compliant ASC X12N 271 or 277 transaction. You may load the received file to your internal systems for your use.

To send and receive ASC X12N 270/271 and 276/277 transactions, refer to the MassHealth Companion Guide for each of these transaction sets.

### ***Remote Access Server (RAS) – Batch Inquiry***

The RAS offers providers new benefits. The RAS acts as a single point of connection. If you do not have internet connectivity, you may dial into the RAS and have access to WebREVS via your web browser. If you use the PC Software, you can dial in with your modem to the RAS for connectivity to REVS.

The RAS allows you to connect to REVS either through the internet site, or dial-up, and leave a batch file for processing. Batch files have the benefit of being able to search three years of claims history. Eligibility information is available from the day of inquiry and six months prior. For example, if the day of inquiry is January 1, 2005, eligibility information is available from July 1, 2004 through January 1, 2005. The batches process on an hourly basis and are ready to be picked up one hour from uploading. You need your User ID and password to access the batch option.

### ***Point-of-Service (POS) Device – Single Inquiry***

The POS device is another access method for verifying eligibility information in a timely manner. All eligibility inquiries performed take less than eight seconds to process. The POS device can be easily installed in a provider's facility and may share any single line telephone line. The POS device also has the ability for an immediate printout of eligibility information if the provider chooses to attach a

printer. A printout can provide instantaneous and visible assurance that the provider has the most current eligibility information available.

For additional information on receiving a POS device, please read further. Otherwise, turn to page 24 for information about the Automated Voice Response (AVR) System.

### **What is a POS Device?**

The POS device is an electronic transaction device that transmits eligibility information through your telephone line, while only occupying the phone line during an actual inquiry transmission. Operation of the POS device is quite simple and resembles a device used for processing credit card transactions. REVS currently supports one type of POS device, the VeriFone Omni 395 (or 396). The POS device attaches to a standard modular telephone wall jack.

The POS device cannot be used on a telephone line that has the call-waiting feature. Providers with the call-waiting feature must have another line installed, or cancel their call-waiting feature in order to use the POS device.

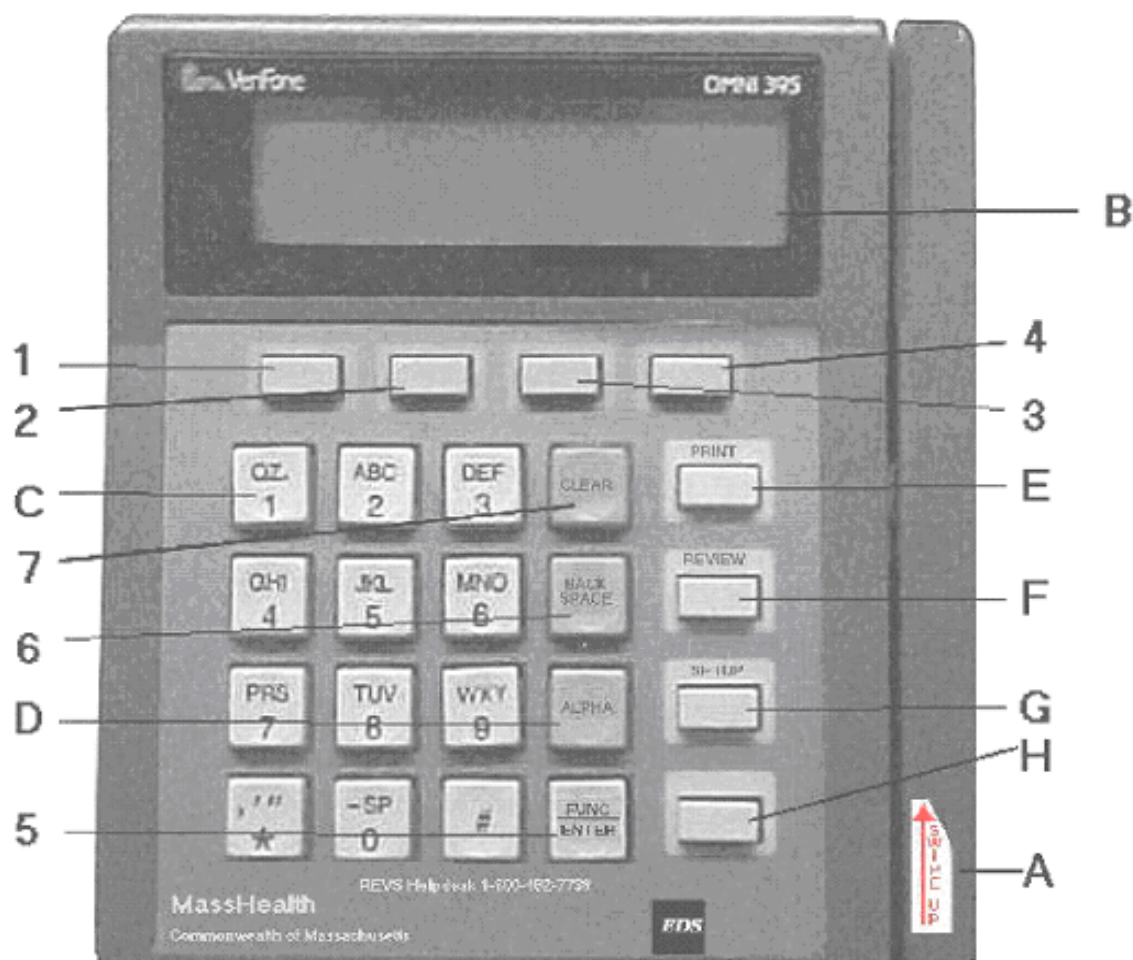
Staff at the REVS Help Desk can help you determine if the POS device is compatible with your office telephone system, if you may share an existing compatible phone line (i.e., fax/modem), or if a separate line must be installed.

#### ***WARNING!***

*The MassHealth POS device is incompatible with digital telephone service. Connecting the POS device to a digital service's (PBX, Executone, etc.) phone switch may damage the POS device and/or the phone switch. For additional information on telephone system compatibility, call the REVS Help Desk at (800) 462-7738.*

An optional, attachable printer may be purchased which will allow you to print a paper copy of an eligibility inquiry and response immediately. Please call the REVS Help Desk for more information on purchasing a printer.

**Figure 5: Illustration of the VeriFone Omni 395 Point-of-Service Device**

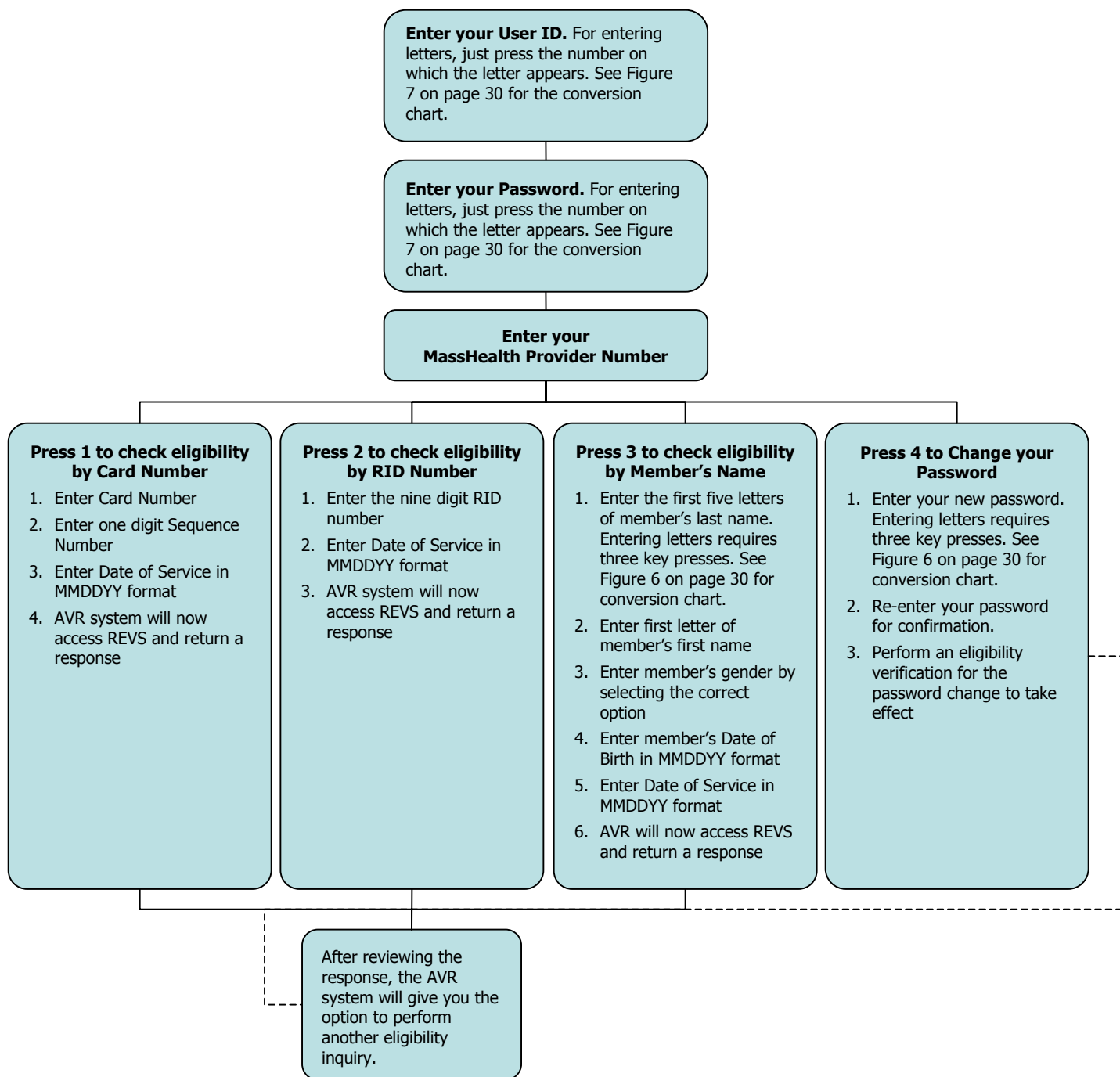


1	Blue option key 1*	A	Indicates direction to swipe card
2	Blue option key 2*	B	Display Screen
3	Blue option key 3*	C	Number key
4	Blue option key 4*	D	ALPHA button
5	ENTER button	E	PRINT button
6	BACKSPACE button	F	REVIEW button
7	CLEAR button	G	SETUP button
		H	Not Used

\*option keys perform function listed above (when available)

## ***Automated Voice Response (AVR) System – Single Inquiry***

Providers can access REVS data through the Automated Voice Response (AVR) system by **telephone**. You must have a valid User ID and Password along with the MassHealth provider number in order to access the AVR system. This system allows you to verify eligibility by card number, the member's recipient identification (RID) number or the member's name. It is recommended to only use the AVR system when you do not have access to WebREVS, the POS device or the REVS PC software at your facility, or when your primary way to access REVS is not functioning properly. Eligibility inquiries performed on WebREVS, the POS device and the REVS PC software are faster.



## Telephone Specifications

The only kind of telephone that you can use to access REVS is a regular touch-tone phone. This phone is the one most providers have in their offices. It can be identified by different tones when dialing.

### **NOTE:**

*The primary methods of performing eligibility inquiries should be WebREVS or the REVS PC software, because the AVR system returns limited information and the connection can be lost if you take too long to respond to a prompt.*

## Operating the Automated Voice Response (AVR) System

### **Special Function Keys**

There are three keys on the telephone keypad that have different functions. The following is an explanation of their functions:

<b>#</b>	The Pound Key: This key must be pressed after each piece of information is entered in order to proceed to the next step.
<b>8</b>	The Number 8 Key: Pressing the number 8 gives you the following message "For any questions about the use of the MassHealth Automated Voice Response System please call (800) 462-7738. Thank you for calling MassHealth."
<b>9</b>	The Number 9 Key: This key can be pressed if you need to repeat the previous message.

## Procedures for Using the AVR

### **NOTE:**

*Please refer to the illustration of the MassHealth card on page 7 to identify the correct information to enter. Any time invalid data is entered; the AVR will ask you to re-enter the data. You are allowed **three** attempts to correctly enter the requested data.*

The following are step-by-step instructions for using the AVR system to verify MassHealth recipient eligibility.

### **Step 1: Dial (800) 554-0042. You will hear the following message.**

Welcome to MassHealth.

OR

The Massachusetts Recipient Eligibility Verification System is currently unavailable. If you are calling between the hours of 3 – 6 a.m. on Sunday, system maintenance is being performed. If you are calling outside of these hours, we are experiencing technical difficulties. Please call back later. Thank you for calling MassHealth.

### **Step 2: Enter your User ID for the provider number you need to verify.**

Please enter your User ID followed by the pound key. Entering letters requires 1 press for each letter. Using your touchtone keypad, press the key that has the letter you need to enter. For q and z, press 1. To enter a number, simply press that number. To repeat this information, press 9.



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**NOTE:**

*If the system supporting MassHealth is unavailable, the AVR will respond with the previous message; however, access may still be available through WebREVS, REVS PC software, POS device, or the Eligibility Operator. Any time you have difficulty accessing the system, call the REVS Help Desk at (800) 462-7738 for assistance.*

**Step 3: Enter the password associated with your User ID.**

Please enter your password followed by the pound key. Entering letters requires one press for each letter. Using your touchtone keypad, press the key that has the letter you need to enter. For q and z, press 1. To enter a number, simply press that number.

**Step 4: Enter your provider number associated with the User ID.**

Please enter your provider number followed by the pound key.

Next you will hear the **Main Menu**:

Press 1 to verify eligibility by Card.

Press 2 to verify eligibility by RID.

Press 3 to verify eligibility by Name or

Press 4 to change your Password.

To end this call hang up.

For assistance press 8.

To repeat this information press 9

**Verifying Eligibility by the Member's Card Number**

Below are steps 5-8, following steps 1-4 mentioned previously, that should be followed to verify a MassHealth member's eligibility using the card number.

**Step 5: Press 1 to verify eligibility by card number. This is the prompt you will hear for entering the card number.**

Enter Card Number followed by the pound key.

**Step 6: Enter the member's 10-digit card number followed by the pound key.**

Enter one digit member Sequence Number followed by the pound key.

**Step 7: Press the one digit sequence number of the MassHealth member (1,2,3,4) followed by the pound key. The next prompt you will hear is for entering the date of service.**

Enter the Date of Service in month, month, day, day, and two digit year format, followed by the pound key. For today press the pound key.

**Step 8: Enter the date of service that you are checking followed by the pound key. For instance, January 4, 2004 would be entered as 010404#. If you are using the current day as the date of service, press the pound key. Now you will be asked to wait while the AVR is sending your verification and getting a response back.**

Please Wait

Your response will be returned momentarily. The response information begins on page 27.

### Verifying Eligibility by the Member's Recipient Identification (RID) Number

Below are steps 5-7, following steps 1-4 mentioned previously, that should be followed to verify a MassHealth member's eligibility using the member's recipient identification (RID) number.

<b>Step 5:</b>	<b>Press 2 to verify eligibility by member's recipient identification (RID) number.</b>
	Enter nine digit RID number followed by the pound key.
<b>Step 6:</b>	<b>Enter the member's 9 digit RID number followed by the pound key. The 10<sup>th</sup> digit is not required for the AVR System. For 'X' enter *92, for 'Z' enter *12. The next prompt you will hear is for entering the date of service.</b>
	Enter the Date of Service in month, month, day, day, and two digit year format, followed by the pound key. For today press the pound.
<b>Step 7:</b>	<b>Enter the date of service that you are checking followed by the pound key. For instance, January 4, 2004 would be entered as 010404#. If you are using the current day as the date of service press the pound key.</b>
	Please wait.
	<b>The Automated Voice Response system is sending out your verification. Your response will be returned momentarily. The response information begins on page 27.</b>

### Verifying Eligibility by the Member's Last Name, First Initial, Date of Birth and Gender

Below are steps 5-12, following steps 1-4 mentioned previously, that should be followed to verify MassHealth eligibility when using a member's last name, first initial, date of birth, and gender.

<b>Step 5:</b>	<b>Press 3 to verify eligibility using a member's last name and first initial. This is the prompt you will hear for entering the name.</b>
	Enter the first five characters of the member's Last Name followed by the pound key. Entering letters on a touch-tone phone requires two presses for each letter. First, press the key that has the letter you need to enter. Next, press the 1,2, or 3 key representing the position of the letter on that key. Enter q as 1, 1 and z as 1, 2. For example, for the letter A press 2, 1, for the letter B press 2, 2.
<b>Step 6:</b>	<b>Enter the first five letters of the member's last name followed by the pound key. You will then hear a confirmation of the name you have entered.</b>
	You have selected [AVR will repeat the letters you have just entered], press 1 to confirm this selection. Press 2 to change your selection.
<b>Step 7:</b>	<b>Press 1 to confirm your selection or 2 to change your selection. The following is the prompt you will hear for entering the first name.</b>
	Enter the first character of the member's First Name followed by the pound key.
<b>Step 8:</b>	<b>Enter the first letter of the member's first name followed by the pound key.</b>
	You have selected [AVR will repeat the letter you have just entered], press 1 to confirm this selection. Press 2 to change your selection.
<b>Step 9:</b>	<b>Press 1 to confirm your selection or 2 to change your selection. The following is the prompt you will hear for selecting the gender.</b>
	Enter the Gender of the member. Press 1 for male, 2 for female.
<b>Step 10:</b>	<b>Press 1 if the member is male or 2 if the member is female. The following prompt is for entering the member's date of birth.</b>
	Enter the member's Date of Birth in month, month, day, day, and 4-digit year format followed by the pound key.

<b>Step 11:</b>	<b>Enter the member's date of birth following the above format. The following prompt is for entering the date of service.</b>
	Enter the Date of Service in month, month, day, day, and two-digit year format, followed by the pound key. For today press the pound key.
<b>Step 12:</b>	<b>Enter the date of service that you are checking followed by the pound key. For instance, January 4, 2004 would be entered as 010404#. If you are using the current day as the date of service press the pound key.</b>
	Please wait.
	<b>The Automated Voice Response system is sending out your verification. Your response will be returned momentarily.</b>

### Changing Your Password

Below are steps 5-8, following steps 1-4 mentioned previously, that should be followed to change your MassHealth password.

<b>Step 5:</b>	<b>Press 4 to change your password.</b>
	Please listen carefully. Enter your new password followed by the pound key. Passwords are a combination of letters and numbers. Your password must be 6 to 8 characters long, contain at least 4 different letters and at least 1 number. It must be different from your User ID and previous password. Entering letters requires 3 key presses for each letter. First, press the star key. Next, press the key on which the letter appears. Lastly, press the 1, 2 or 3 key, representing the position of that letter on the key. For example, the letter A is entered *21. For the letter q enter *11. For the letter z enter *12. To enter a number, press that number on the keypad. If you have access to the internet, you may change your password at <a href="http://massrevs.eds.com">massrevs.eds.com</a> .
<b>Step 6:</b>	<b>Enter your new password.</b>
	Please re-enter your new password for verification, followed by the pound sign key.
<b>Step 7:</b>	<b>Re-enter your password for confirmation.</b>
<b>Step 8:</b>	You will return to the <b>Main Menu</b> (in step 4). Please note that for the password change to take effect, you will need to perform an eligibility inquiry immediately afterwards.

### AVR Verification Messages

Primary Prompts	Explanation	Action Required
For RID 2112221121 or RID has changed 5512345679	For "RID HAS CHANGED" new member recipient identification (RID) number does not match that on card. Member should request new card from LO/MEC.	No action required
Member's Date of Birth is September 12, 1954	For Date of Birth	Press #
No PCC/MCO approvals needed yet" or For PCC approval of medical services call:	Member currently has not been assigned to a Primary Care Clinician (PCC)  Member has been assigned to a PCC; the PCC must authorize most services for PCCP members	Press #

Primary Prompts	Explanation	Action Required
For Mental Health/Substance Abuse service (MH/SA) authorization call the Partnership at (800) 998-6462.	Member has a restrictive message(s)	Press #
Member is a resident at a long term care facility.		No action required
Member has other insurance with carrier	For Third Party Liability	No action required
00001	Carrier Code for Third Party Liability	No action required
Policy Number is: 1423456789.	If Policy # exists	No action required
Coverage codes are: "05."	Coverage Codes for Third Party Liability	Press #
Long Term Care Provider number is 1234567	For Long Term Care	Press #
Local Office # is: 999	For Local Office/MEC	No action required
Coverage Type is: Standard	Member has "standard" coverage, one of several possible coverage types	Press #
The member is ELIGIBLE on February 1, 2004	Member is eligible for date of service	No action required
Press the pound key to continue		Press #
To perform another eligibility inquiry by Card press 1. To perform another eligibility inquiry by RID press 2. To perform another inquiry by Name press 3. To end this call hang up. For assistance press 8. To repeat this information press 9.	Eligibility inquiry is complete	Start another eligibility inquiry.

**NOTE:**

*It is important to obtain the entire message for full details of restrictions. Otherwise, you risk denial of your claim. If you have questions about the types of services covered under a specific coverage type consult your MassHealth Provider Manual. For additional information you can call MassHealth Provider Services at (617) 628-4141, or (800) 325-5231.*

## Call Termination Messages

Message	Description of Message
You have exceeded the maximum allowed transactions. Thank you for calling MassHealth.	The maximum number of eligibility inquiries per telephone call is five during business hours.
You have exceeded the time limit allotted since your last response. Please review the procedures in your MassHealth Provider Manual or call (800) 462-7738 for assistance. Thank you for calling MassHealth.	You are allowed six seconds to enter data after you have received an instruction from the AVR.
You have exceeded the limit for input errors. Please review the procedures in your MassHealth Provider Manual, or call (800) 462-7738 for assistance. Thank you for calling MassHealth.	At all entry steps, you are allowed three attempts to correctly enter the requested data.
Thank you for calling MassHealth.	The eligibility inquiry has ended.

## AVR Error Messages

All error messages are followed by a prompt that tells the user the valid data that needs to be entered to proceed.

Message	Resolution
Invalid provider number XXXXXXXX. Please re-enter.	Make sure the provider number entered was correct. It should be the <u>seven-digit</u> Medicaid provider number.
Invalid Card Number XXXXXXXXXXXX. Please re-enter.	Make sure the number used is correct. The number in the <u>largest print</u> on the MassHealth card is the correct number (See Figure 1, page 7). Common errors include not entering all digits, entering too many digits, or entering a member recipient identification (RID) number rather than the card number.
Card Number XXXXXXXXXXXX has been deactivated.	Card number has been invalidated and can no longer be used to access MassHealth. Ask the member if they are holding an updated card or verify eligibility by the member's ID number or name and date of birth. If you continue to have difficulties call the REVS Help Desk at (800) 462-7738.
Invalid Sequence Number X. Please re-enter.	Make sure the sequence number entered is correct. It should be 1, 2, 3, or 4. Re-enter the sequence number. If it is correct, call the Eligibility Operator at (800) 833-7582, <u>and</u> call the REVS Help Desk at (800) 462-7738 to report the problem. Inform the member that there is a problem with their card.
Invalid RID Number XXXXXXXXXXXX. Please re-enter.	Make sure the number used is correct. The number just below or to the right of the member's name is the correct number (See Figure 1, page 7). Common errors include entering all 10 digits--enter only the first nine--or entering the RID number with a letter in it.
Invalid Date of Service XXXXXX. Please re-enter.	Date of service should be entered in MM/DD/YY format with six digits. For example, January 4, 2004 is entered as 010404.
Date of Service not within last 6 months. Press the pound key to continue.	Date of service must be the current date or a date within the <u>past</u> six months.
Invalid User ID. Please re-enter.	User ID did not match what was in REVS. Re-enter valid User ID.
Invalid Provider number for this user. Please re-enter.	Provider Number associated with the User ID does not match. Enter valid provider number for that User ID.
User ID not found. Please re-enter.	User ID did not match what was in REVS. Re-enter valid User ID.
Invalid Password. Please re-enter.	A password was not entered. Enter a valid password.
Password is the same as previous password. Please re-enter.	Invalid password. The password may not be identical to your previous password. Please re-enter.
Invalid password, you have reached the limit for password input errors. Your User ID has been locked out. Please contact your account administrator.	You have entered an invalid password for the associated User ID more than five times. Contact your REVS Security Administrator to have your password reset.

Message	Resolution
Invalid Password. The password may not be identical to the User ID. Please re-enter.	The new password entered is the same as the old password. Enter a password that is not equal to the old password.
Invalid Password. The password must contain at least four different characters. Please re-enter.	The new password entered does not meet the REVS security requirements. Enter at least four different characters and at least one number.
Invalid Password. The password must contain at least one number. Please re-enter.	The new password entered does not meet the REVS security requirements. Enter at least four different characters and at least one number.
Invalid Password. The password may not be greater than eight characters. Please re-enter.	The length of the password entered is not valid. The password must be at least six characters in length and not greater than eight.
Invalid Password. The password must be at least six characters. Please re-enter.	The length of the password entered is not valid. The password must be at least six characters in length and not greater than eight.

### Alphabetic Character to Number Conversion for AVR

The tables below indicate when to enter three characters for a letter and when to enter one character for a letter.

**Figure 6**

Use these values when <i>changing</i> your password. Do not precede with * when inquiring by Member's name.	
Alpha Character	Touchtone Keys
A	*21
B	*22
C	*23
D	*31
E	*32
F	*33
G	*41
H	*42
I	*43
J	*51
K	*52
L	*53
M	*61
N	*62
O	*63
P	*71
Q	*11
R	*72
S	*73
T	*81
U	*82
V	*83
W	*91
X	*92
Y	*93
Z	*12

**Figure 7**

Use these values when <i>entering</i> your User ID and Password (no update to Password needed.)	
Alpha Character	Touchtone Key
A, B, C	2
D, E, F	3
G, H, I	4
J, K, L	5
M, N, O	6
P, R, S	7
T, U, V	8
W, X, Y	9
Q, Z	1

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## The Eligibility Operator

### Conflict Resolution

If you are unable to access REVS using WebREVS, REVS PC software, POS device, or the AVR system, a toll-free telephone number is provided to contact an operator for eligibility inquiries and managed care enrollment information. The operator will provide you with the member's card number. Requesting and verifying card numbers to get the member's recipient identification (RID) number for billing purposes will minimize billing errors. When dialing the Eligibility Operator, please have the following information ready in the sequence listed, in order for the Eligibility Operator to respond faster:

1. User ID and Password
2. Your Provider Number, associated with the User ID and Password
3. Date of Service and one of the following:
  - Member's recipient identification (RID) number;  
or
  - MassHealth card number and Member's sequence number;  
or
  - Member's full name, Member's gender, and Member's date of birth.

#### **NOTE:**

*Please be aware that calls to the Eligibility Operator may be monitored for quality assurance.*

*Call (800) 833-7582 - 24 Hours a Day - seven Days a Week\*  
For current day eligibility and up to six months prior.*

*\*Except Sunday from 2 AM – 6 AM*

## Other Access Methods

There are options available to access REVS and its subsystems through other organizations. These are other entities and are not directly supported by MassHealth.

### **NEHEN**

New England Healthcare EDI Network (NEHEN) has connectivity with MassHealth. You may use the software they provide to access our system.

### **Third Party Vendors**

There are a number of vendors who may provide connectivity to our system. For a current list of Third Party vendors who provide connection to REVS, please call the REVS Help Desk at (800) 462-7738.

## REVS Contact Information

For questions about the operation of WebREVS, REVS PC Software, the Point-of-Service (POS) Device, the Automated Voice Response (AVR) system dialing procedures, or if you are experiencing equipment malfunctions, please call the toll-free REVS Help Desk number below. For immediate assistance, please call between 8:00 A.M. and 5:00 P.M. EST, Monday through Friday. At other times, you may leave a message about your concerns for prompt resolution on the next business day.

**REVS Help Desk** (800) 462-7738

If you need immediate access to REVS for member eligibility information, for prompt service please call:

**Automated Voice Response** (800) 554-0042  
**Eligibility Operator** (800) 833-7582

Access our Web site at: <https://www.massrevs.eds.com>

Contact EDS by email at: [REVSHelpDesk@eds.com](mailto:REVSHelpDesk@eds.com)

Contact EDS in writing at:

Attention: Provider Services  
EDS Mass REVS  
155 Federal Street  
6th Floor  
Boston, MA 02110

For questions concerning discrepancies in member eligibility information, please call the cardholder's Local Office/MEC.

If you have any suggestions on how to improve REVS, please contact EDS at the above address.



## Local, MassHealth, and SSI Offices – also Other Agencies’ Contact Information

Please note that this information is subject to change without notice.

Office Number	City	Address	Zip	Telephone
004	North Adams	37 Main St	01247	(413) 663-1100
020	Hyannis	77 High School Road	02601	(508) 862-6600
044	Brockton	75 Commercial Street	02401	(508) 895-7000
097	Fall River	1547 North Main Street	02720	(508) 646-6200
098	Falmouth	155 Kathy Lee Bates Road	02540	(508) 495-1400
099	Fitchburg	473 Main Street	01420	(978) 665-8700
102	Framingham	105 Irving Street	01701	(508) 661-6600
116	Greenfield	1 Arch Place, Suite 2a	01301	(413) 772-3400
140	Holyoke	72-100 Front Street	01040	(413) 552-5400
152	Lawrence	15 Union Street	01840	(508) 725-7100
163	Lowell	131 Davidson Street	01852	(978) 446-2400
168	Malden	200 Pleasant Street	02148	(781) 388-7300
180	Milford	25 Birch Street	01757	(508) 634-7100
204	New Bedford	160 W. Rodney French Boulevard	02744	(508) 961-2000
217	Northampton	15 Straw Avenue	01060	(413) 587-4500
239	Pittsfield	75 South Church Street	01201	(413) 236-2000
242	Plymouth	61 Industrial Park Road	02360	(508) 732-3100
252	Revere	300 Ocean Avenue	02151	(781) 286-7800
262	Salem	35 Congress Street	01970	(978) 825-7300
278	Somerville	1 Davis Square	02144	(617) 629-1400
282	Southbridge	79 North Street	01550	(508) 765-2400
285	Springfield	310 State Street	01105	(413) 858-1300
297	Taunton	21 Spring Street	02780	(508) 884-5300
333	Westfield	125 North Elm Street	01085	(413) 564-5100
343	Springfield	95 Liberty Street	01103	(413) 858-1000
352	Worcester	9 Walnut Street	01608	(508) 767-3100
420	Boston	600 Washington Street	02111	(617) 348-5600
425	Boston	1010 Massachusetts Avenue	02118	(617) 989-2200
490	Dorchester	90 Washington Street	02121	(617) 989-6000
<b>MassHealth Offices</b>				
500	Charlestown	529 Main Street, Suite 1M3	02129	(800) 843-7114
510	Tewksbury	367 East Street	01876	(978) 863-9200
520	Springfield	333 Bridge Street	01103	(413) 785-4100
550	Revere	300 Ocean Avenue Suite 4000	02151	(781) 485-2500
570	Taunton	21 Spring Street Suite 4	02780	(508) 282-4600
580	Boston	600 Washington Street	02111	(617) 210-5000

SSI Offices				
610	Roslindale	970 American Legion Highway	02131	(800) 590-4820
620	Springfield	310 State Street	01105	(800) 441-4750
630	Worcester	9 Walnut Street	01608	(800) 715-5494
650	Revere	300 Ocean Avenue	02151	(800) 522-4454
670	Fall River	1567 North Main Street	02720	(800) 570-4792
Other Agencies				
AGO	Boston	1 Ashburton Place	02108	(617) 727-2200
ANF	Boston	State House	02133	(617) 727-2040
BSI	Boston	1 Ashburton Place	02108	(617) 727-6950
DET	Boston	19 Staniford Street	02114	(617) 626-5400
DMH	Boston	25 Staniford Street	02114	(617) 626-8000

## GLOSSARY

Asterisk	The symbol *
AVR system	Automated Voice Response system: the system that permits eligibility inquiries to be made directly to, and responses to be heard from REVS using a telephone.
Card Number	The 10-digit number on the MassHealth card appearing directly under the word "MassHealth."
Data	Information to be entered
DTA	Department of Transitional Assistance
EDS	Electronic Data Systems: the contractor responsible for administering REVS.
Eligibility Operator	An individual who responds to MassHealth eligibility inquiries over the telephone and whom you reach by dialing (800) 833-7582.
Field	Area on the POS device screen where you can see displayed, either information entered or response received.
Help Desk	The REVS support line that you can call for assistance at (800) 462-7738. This number should only be used when you are experiencing equipment issues or have REVS related questions.
HIPAA	Health Insurance Portability and Accountability Act.
MassHealth	The Commonwealth's benefit plans for health care coverage.
MassHealth ID card	The plastic ID card with a black magnetic stripe on the back used to access REVS.
Member Sequence Number	The number that specifically identifies an individual listed in sequence on a MassHealth card. It can be 1, 2, 3, or 4.
PC Software	Computer software that can be installed on your PC to verify MassHealth eligibility or claim status. It is also referred to as REVS PC Software.
POS	Point-of-Service Device: a device used by high-volume providers to perform eligibility inquiries.
Pound Key	The symbol #
Provider Number	Numeric value assigned to each MassHealth provider.
Provider Table	The list of providers placed in the POS device's memory at a particular location.
RAS	Remote Access Server. Access method used to connect to REVS.
REVS	Recipient Eligibility Verification System
REVS PC Software	See PC Software
RID Number	Member's Recipient Identification Number
TPL	Third Party Liability: other insurance coverage that can be used to cover medical expenses.
VeriFone Omni 395/396	The POS device (model 395 or 396)
WebREVS	Secure internet Web site that allows full access to REVS and its subsystems. Visit <a href="https://www.massrevs.eds.com">https://www.massrevs.eds.com</a> for more information.

## Appendix A

Listed below are examples of messages that may be seen or heard when accessing REVS. The list does not include all possible messages.

### Examples of POSSIBLE coverage types

Basic  
Standard  
EAEDC  
Essential  
Prenatal  
Commonhealth  
MH Only  
Senior Buy In  
Buy In  
Limited  
Premium Assist  
Family Assist

### Examples of Restrictive Messages

NHP MEMBER. CALL HMO FOR APPROVAL FOR ALL SERVICES EXCEPT DRUGS, DENTAL. (617) 772-5530.  
CMA MEMBER. CALL HMO FOR APPROVAL FOR ALL SERVICES EXCEPT DRUGS, DENTAL, FAMILY PLANNING, GLASSES. (617) 423-0400.  
PRIOR APPROVAL MANDATORY FOR ALL CARE. CALL ESP AT FALLON AT (508) 852-2026.  
EAEDC (CAT. 04) SERVICES RESTRICTED. SEE 130 CMR 450.106. FOR QUESTIONS, CALL PROVIDER SERVICES AT (800) 325-5231.  
PRIOR APPROVAL MANDATORY FOR ALL CARE. CALL HARBOR ELDER SERVICES AT (617) 296-5100.  
MEDICARE-COVERED SERVICES ONLY.  
NHP MEMBER. CALL HMO FOR APPROVAL FOR ALL SERVICES EXCEPT DENTAL. FAMILY PLANNING, GLASSES (617) 772-5530.  
COMMONHEALTH MEMBER. FOR QUESTIONS, CALL (617) 628-4141, or (800) 325-5231.

**NOTE:**

*Please refer to Appendix Y of your MassHealth Provider Manual for a complete listing of all restrictive messages.*

## Appendix B

### MassHealth Referral Phone Numbers

For Questions About	Please Call	Phone Number
<ul style="list-style-type: none"> <li>All Billing and Claims Information (except for mental health or substance abuse related claims)</li> <li>90 Day Waiver</li> <li>Policy Questions (re: services covered by MassHealth)</li> <li>Service Codes, Coverage Types</li> </ul>	MassHealth Provider Services In-state providers should call: Out-of-state providers should call:	(800) 325-5231 (617) 628-4141
<ul style="list-style-type: none"> <li>Customer Service for MassHealth</li> <li>Cardholder Eligibility Questions</li> <li>Enrollment in Managed Care</li> <li>Transportation Authorization (Provider would only call on behalf of member)</li> </ul>	MassHealth	(800) 841-2900
<ul style="list-style-type: none"> <li>Prior Authorization</li> <li>Administrative Regulations and Billing Manual</li> <li>Provider Enrollment</li> <li>Carrier Codes/Coverage Types</li> </ul>	MassHealth In-state providers should call: Out-of-state providers should call:  In-state providers should call: Out-of-state providers should call:  Third Party Liability (TPL)	(800) 862-8341 (617) 210-5555  (800) 322-2909 (617) 576-4424  (888 ) 628-7526
<ul style="list-style-type: none"> <li>Eligibility System Down</li> <li>Equipment Repairs (POS devices, Printers)</li> <li>General MassHealth Questions</li> <li>Provider Detail Report</li> <li>Security Access Questions</li> </ul>	EDS	(800) 462-7738

For Questions About	Please Call	Phone Number
<ul style="list-style-type: none"><li>• Mental Health and Drug/Substance Abuse</li><li>• Authorization for Services</li><li>• All billing claims and information for mental health or substance abuse related claims</li><li>• Any Primary Care Clinician (PCC) Plan Related Question</li></ul>	MBHP	(800) 495-0086
<ul style="list-style-type: none"><li>• Elective Admission</li><li>• Pre-admission Screening for Acute &amp; Chronic/Rehab Hospitals</li></ul>	MASSPRO	(800) 732-7337